

# CACFP MONTHLY MEAL COUNT SUMMARY

Instructions:

1. Write the month, year, and date range for each week in the corresponding areas below.
2. Transfer totals of meal counts by **type** (breakfast, lunch, dinner, and snack) and **category** (free, reduced price, and paid) from the "Weekly Meal Count Summary Sheet(s)" to the corresponding row and column on this form.
3. For each row, add all weekly totals from columns C-G, and record the monthly total for that meal type and category in column H.
4. **Transfer totals in column H to the corresponding monthly "Claim for Reimbursement" form.**      **MONTH/YEAR** \_\_\_\_\_

(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)
MEALS SERVED	CATEGORY	WEEK 1	WEEK 2	WEEK 3	WEEK 4	WEEK 5	TOTALS
<b>Dates:</b>							
BREAKFAST	FREE						
	REDUCED						
	PAID						
LUNCH	FREE						
	REDUCED						
	PAID						
DINNER	FREE						
	REDUCED						
	PAID						
SNACK	FREE						
	REDUCED						
	PAID						

# CACFP WEEKLY MEAL COUNT SUMMARY

## BY AGE / CLASS ROOM

Instructions:

1. Write the week, year and the class number/name in the corresponding areas below.
2. Transfer totals of meal counts by **type** (breakfast, lunch, dinner, and snack) and **category** (free, reduced price, and paid) from the "Daily Record of Meals Served" to the corresponding row and column for each class.
3. For each row, add columns C-I and write the total in column J.
4. Transfer totals from Column J to the "CACFP Meal Count Sheet for the Month".

WEEK/YEAR OF: \_\_\_\_\_

(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)
MEALS SERVED	CATEGORY	CLASS 1	CLASS 2	CLASS 3	CLASS 4	CLASS 5	CLASS 6	CLASS 7	TOTALS
<b>CLASS # OR NAME:</b>									
BREAKFAST (B)	FREE								
	REDUCED								
	PAID								
LUNCH (L)	FREE								
	REDUCED								
	PAID								
DINNER (D)	FREE								
	REDUCED								
	PAID								
SNACK (S)	FREE								
	REDUCED								
	PAID								

Instructions: Meal counts must be recorded by child, "at the point of service." Enter a "B" for breakfast, "S" for snack, "L" for lunch, and "D" for dinner.

revised 9/05

Month/Year: _____		MONDAY DATE: _____					TUESDAY DATE: _____					WEDNESDAY DATE: _____					THURSDAY DATE: _____					FRIDAY DATE: _____					TOTALS ACROSS				
Child's First and Last Name		B	S	L	S	D	B	S	L	S	D	B	S	L	S	D	B	S	L	S	D	B	S	L	S	D	B	S	L	S	D
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20																															
TOTAL (ACROSS)		B	S	L	S	D	B	S	L	S	D	B	S	L	S	D	B	S	L	S	D	B	S	L	S	D					
TOTAL (DOWN) (Must equal totals across)																															
FREE Meals																															
REDUCED Meals																															
OTHER (Paid) Meals																															

Class:

CACFP WEEKLY RECORD OF MEALS SERVED

Instructions: Meal counts must be recorded by child, "at the point of service." Enter a "B" for breakfast, "S" for snack, "L" for lunch, and "D" for dinner.

revised 9/05

Month/Year: _____			MONDAY DATE: _____					TUESDAY DATE: _____					WEDNESDAY DATE: _____					THURSDAY DATE: _____					FRIDAY DATE: _____					TOTALS ACROSS					
Child's First and Last Name		B	S	L	S	D	S	B	S	L	S	D	S	B	S	L	S	D	S	B	S	L	S	D	S	B	S	L	S	D	S		
1																																	
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TOTAL (ACROSS)		B	S	L	S	D	S	B	S	L	S	D	S	B	S	L	S	D	S	B	S	L	S	D	S	B	S	L	S	D	S		
TOTAL (DOWN) (Must equal totals across)																																	
FREE Meals																																	
REDUCED Meals																																	
OTHER (Paid) Meals																																	

PAGE TOTALS:

Instructions: Transfer page totals to the "Weekly Meal Count Summary Sheet by Class/Age" or "Meal Count Sheet for the Month"

	BREAKFAST (B)	LUNCH (L)	DINNER (D)	SNACK (S)
FREE				
REDUCED				
OTHER (PAID)				

Edit check:

Totals across in shaded area above equal totals down

Only 2 meals and 1 snack or 2 snacks and 1 meal may be claimed per child per day.